

## GENERAL FACT SHEET

BILL NUMBER 10R-304

BRIEF TITLE	APPROVAL DEADLINE	REASON
Annual Supply of Clow Fire Hydrant Parts, Bid No. 10-160		Multiple Year Contract

## DETAILS

## POSITIONS/RECOMMENDATIONS

Resolution to provide the Annual Supply of Clow Fire Hydrant Parts from Lincoln Winwater Works Company as per Bid No. 10-160 effective upon execution by both parties thru August 1, 2012, with the option for one (1) two (2) year renewal. This service will be used by the Public Works & Utilities Department for the acquisition of Clow Fire Hydrant Parts as needed. The estimated cost is \$5,471.50/ year for a total of \$10,943.00 for the two (2) year period.	Sponsor	Purchasing
	Program Departments, or Groups Affected	Public Works & Utilities - Water
	Applicants/ Proponents	Applicant: Purchasing  City Department: Other
Discussion (Including Relationship to other Council Actions)	Opponents	Groups or Individuals  Basis of Opposition
	Staff Recommend.	<input type="checkbox"/> For <input type="checkbox"/> Against Reason Against
	Board or Commission Recommend.	BY <input type="checkbox"/> For <input type="checkbox"/> Against <input type="checkbox"/> No Action Taken <input type="checkbox"/> For with revisions or conditions (See Details column for conditions)
	CITY COUNCIL ACTIONS (For Council Use Only)	<input type="checkbox"/> Pass <input type="checkbox"/> Pass (As Amended) <input type="checkbox"/> Council Sub. <input type="checkbox"/> Without Recommendation <input type="checkbox"/> Hold <input type="checkbox"/> Do not Pass

## DETAILS

## POLICY/PROGRAM IMPACT

POLICY OR PROGRAM CHANGE	X NO <input type="checkbox"/> YES    	
OPERATIONAL IMPACT ASSESSMENT	   	
FINANCES		
COST AND REVENUE PROJECTIONS	COST of total project:      \$ COST of this Ordinance/ Resolution                      \$	
	RELATED annual operating Costs                      \$	
	INCREASE REVENUE EXPECTED/YEAR              \$	
SOURCE OF FUNDS	CITY [Approximately] _____ \$ _____ %  _____ \$ _____ %  _____ \$ _____ %  NON CITY [Approximately] _____ \$ _____ %  _____ \$ _____ %  _____ \$ _____ %	
	BENEFIT COST <input type="checkbox"/> Front Foot Assessment                      Average <input type="checkbox"/> Square Foot              \$ _____ \$ _____	

REFERENCE NUMBER